



IFW/1723

Attorney Docket No. F-5629 (0360-0017.01) PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re application of:)
William H. Cork)
Serial No. 10/031,112)
Filed: 01/14/2002)
Group Art No.: 1723)
Examiner: Terry K. Cell)
Confirmation No. 2485)
For: Medical System, Method)
and Apparatus Employing)
MEMS)

CERTIFICATE OF MAILING BY EXPRESS MAIL
Express Mail Mailing Label No.: EV643274096US
Date of Deposit: November 14, 2005

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Name: Diane G. Kapil
Signature: *Diane G. Kapil*

Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Certificate of Mailing Under 37 CFR 1.10

I hereby certify that the correspondence listed below is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service, **Label No. EV643274096US** under 37 CFR 1.10 on November 14, 2005 and is addressed to: Mail Stop Petition, Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450:

1. Certificate of Mailing.
2. Petition to Withdraw Holding of Abandonment.
3. Return Receipt Postcard.

Name: Diane G Kapil
Signature: *Diane G. Kapil*
EV643274096US



Patent
Attorney Docket No. F-5629 (0360-0017.01)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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William H. Cork)
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Petitions, Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450.

Name: Diane G. Kapil

Signature: *Diane G. Kapil*

PETITION TO WITHDRAW HOLDING OF ABANDONMENT

Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby submits a petition to the Commissioner of
Patents to withdraw the Notice of Abandonment mailed October 7,
2005, in the above case. The Notice of Abandonment states that
this application stands abandoned in view of Applicants' failure

to timely pay the required issue fee and publication fee within the statutory period of three months from the mailing date of the Notice of Allowance. As set forth below, the required issue fee and publication fee were timely paid.

A Notice of Allowance was mailed to Applicants on April 27, 2005, thereby setting a three month statutory period to pay the required issue fee and publication fee by July 27, 2005. On June 28, 2005, Applicants submitted by facsimile the completed fee transmittal together with a change of correspondence address and a transmittal form (Exhibit 1, attached). The fee transmittal authorized the Director of the office to charge the requisite fees to Deposit Account Number 02-1440.

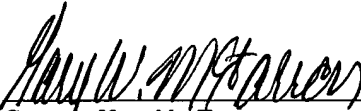
This facsimile was received by the USPTO on June 28, 2005, as evidenced by (1) the record generated by Applicants' own facsimile machine (Exhibit 2) and (2) the Auto-Reply Facsimile Transmission sent to Applicants by the USPTO (Exhibit 3).

Accordingly, Applicants submit that this showing to support the timely filing of the requisite fees is sufficient under 37 CFR §1.181, and withdrawal of the holding of abandonment is respectfully requested.

It is not believed that this request requires payment of a fee, however, if a fee is required, the Commissioner, is authorized to charge such fee to deposit Account No. 50-1039.

Respectfully submitted,

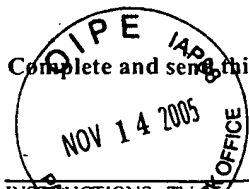
COOK, ALEX, McFARRON, MANZO,
CUMMINGS & MEHLER, LTD.

By: 
Gary W. McFarron,
Reg. No. 27,357

200 West Adams Street
Suite 2850
Chicago, Illinois 60606
(312) 236-8500

Dated: November 14, 2005

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All future correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless directed below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

04/27/2005

Bradford R. L. Price
 Baxter Healthcare Corporation
 Fenwal Division RLP-30
 P O Box 490 - Route 120 & Wilson Road
 Round Lake, IL 60073

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Elizabeth J. Eich	(Depositor's name)
<i>Elizabeth J. Eich</i>	(Signature)
6/28/05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/031,112	01/14/2002	William H Cork	F-5629 (CORK 100 US)	2485

TITLE OF INVENTION: MEDICAL SYSTEM, METHOD AND APPARATUS EMPLOYING MEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/27/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
CECIL, TERRY K	1723	210-085000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Gary W. McFarron

Bradford R. L. Price

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Baxter International Inc.

Deerfield, IL

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 20

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-1440 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Bradford R. L. Price

Date

6-28-05

Typed or printed name

Bradford R. L. Price

Registration No. 29,101

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Com Alexandria, Virginia 22313-1450.

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PTO/SB/122 (04-05)

Approved for use through 07/31/2006. OMB 0651-0035

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**CHANGE OF
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Application**

Address to:
Commissioner for Patents
P.O. Box 1450
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Application Number	10/031,112
Filing Date	11/14/02
First Named Inventor	William H. Cork
Art Unit	1723
Examiner Name	Cecil, Terry K.
Attorney Docket Number	F-5629

Please change the Correspondence Address for the above-identified patent application to:

☐ The address associated with
Customer Number:**OR**☒ Firm or
Individual Name **BAXTER INTERNATIONAL INC.**Address **ONE BAXTER PARKWAY**City **DEERFIELD**State
ILZip **60015**Country **U.S.**Telephone **847-948-2000**Email
FAX **847-948-3880**

This form cannot be used to change the data associated with a Customer Number. To change the
data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 29,101
- ☐ Registered practitioner named in the application transmittal letter in an application without an
executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Typed or Printed
Name**Bradford R. L. Price**

Date

6-28-05

Telephone

847-948-4483

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple
forms if more than one signature is required, see below*.

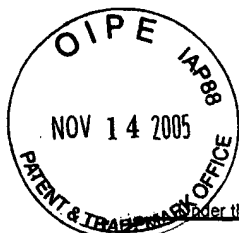
☐ *Total of _____ forms are submitted.

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to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is est
including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon
the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief
Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES
ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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1b

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PTO/SB/21 (09-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number

10/031,112

Filing Date

11/4/02

First Named Inventor

William H. Cork

Art Unit

1723

Examiner Name

Cecil, Terry K.

Attorney Docket Number

F-5629

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Change of Correspondence Address Form PTO/SB/122
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Part B - Fee(s) Transmittal form submitted in duplicate	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	BAXTER INTERNATIONAL INC.		
Signature			
Printed name	Bradford R. L. Price		
Date	6-28-05	Reg. No.	29,101

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Elizabeth J. Eich	Date	6/28/05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public (e.g., in the process of) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to require 15 minutes for gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief, Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR CHECKS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 3.

EXHIBIT

1c



BAXTER LEGAL - IP

JOB #361

DATE TIME TO/FROM MODE MIN/SEC PGS STATUS
6/28 10:39A 717037464000, 585240 EC--S 01' 46" 004 OK

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or **Fax** (703) 746-4000

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 04/27/2005

Bradford R. L. Price
Baxter Healthcare Corporation
Fenwal Division RLP-30
P O Box 490 - Route 120 & Wilson Road
Round Lake, IL 60073

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Elizabeth J. Eich (Depositor's name)
Elizabeth J. Eich (Signature)
6/28/05 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/031,112	01/14/2002	William H Cork	F-5629 (CORK 100 US)	2485

TITLE OF INVENTION: MEDICAL SYSTEM, METHOD AND APPARATUS EMPLOYING MEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CECIL, TERRY K	1723	210-085000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Gary W. McFarron

Bradford R. L. Price

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Baxter International Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Deerfield, IL

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 20

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-1460 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Bradford R. L. Price

Date

6-28-05

Typed or printed name

Bradford R. L. Price

Registration No. 29,101

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Page

A white rectangular label with a black border. The word "EXHIBIT" is printed in bold black capital letters at the top. Below it, the number "3" is printed in a large black font. A horizontal black line is drawn below the number. On the left side of the label, the word "tabbies" is printed vertically in a black, sans-serif font.